

Stormwater Industry Association Ltd Membership Application Form



Yes, I want to become a Member Yes, I want to renew my Subscription

A.C.N. 093 578 164
Suite 8/84 Church St
Richmond VIC 3121

Please tick appropriate box

	Renewal - Full Year	New Member-Full Year	New member - pro-rata
Sustaining Membership - up to 12 Members \$1920.00 yearly plus once only \$66.00 joining fee	<input type="checkbox"/> \$1,920.00	<input type="checkbox"/> \$1,986.00	<input type="checkbox"/>

Note: Where membership commences after December 31st the new member fee payable for Sustaining Membership is pro-rata on a monthly basis.

All subscription rates and fees are GST inclusive

Please enter details of additional Sustaining membership representatives on pages 2 to 5 of this form

Company Name: _____
Address: _____
Suburb: _____ State: _____ Postcode: _____

Primary Contact

Title:
First Name: _____
Surname: _____
Email: _____
BH Phone: _____ Mobile Phone: _____

Industry segment for Organisation - please select one

Education/Research

Applicant's discipline - please select one

Engineer (specify)

Application: I hereby apply for membership of Stormwater Australia and agree to abide by its rules & Code of Conduct whilst I am a member. I understand that my membership will be effective from the date at which my application is approved and my name is entered in the membership register.

Signature: _____ Date: _____

Payment Details

Amount: _____ EFT BSB: 062 900 A/c: 28 036 492
Please quote invoice number and/or Company name

Visa Card MasterCard

Card Number: _____ Expiry Date: _____

Cardholder Name: _____

Signature: _____ Date: _____

Additional Sustaining Membership Representatives

Details provided by: _____ Signature: _____ Date: _____

Title:	<input type="text"/>	▼	2
First Name:	-----		
Surname:	-----		
Company Name:	<input type="text"/>	▼	
Address:	<input type="text"/>	▼	
Suburb:	-----	State: _____	Postcode: _____
Email:	-----		
BH Phone:	-----	Mobile Phone:	-----

Applicant's Discipline - Please check one

<input type="text"/>	Engineer (specify)	▼
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Title:	<input type="text"/>	▼	3
First Name:	-----		
Surname:	-----		
Company Name:	<input type="text"/>	▼	
Address:	<input type="text"/>	▼	
Suburb:	-----	State: _____	Postcode: _____
Email:	-----		
BH Phone:	-----	Mobile Phone:	-----

Applicant's Discipline - Please check one

<input type="text"/>	Engineer (specify)	▼
----------------------	--------------------	---

Title:	<input type="text"/>	▼	4
First Name:	-----		
Surname:	-----		
Company Name:	<input type="text"/>	▼	
Address:	<input type="text"/>	▼	
Suburb:	-----	State: _____	Postcode: _____
Email:	-----		
BH Phone:	-----	Mobile Phone:	-----

Applicant's Discipline - Please check one

<input type="text"/>	Engineer (specify)	▼
----------------------	--------------------	---

Title: ▼ 5

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 6

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 7

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 8

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 9

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 10

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 11

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

Title: ▼ 12

First Name: _____

Surname: _____

Company Name: ▼

Address: ▼

Suburb: _____ State: _____ Postcode: _____

Email: _____

BH Phone: _____ Mobile Phone: _____

Applicant's Discipline - Please check one

▼

